CHANGE OF ACCOUNTING PERIOD 294900650027 OMB No 1545-0047 Return of Organization Exempt From Income Tax Form **99**1 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) (Rev January 2020) lacktriangle Do not enter social security numbers on this form as it may be made public UOpen to Public Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection and ending JUN 30, 2019 A For the 2019 calendar year, or tax year beginning JAN 1. 2019 Check if C Name of organization D Employer identification number Address change EAST BAY COLLEGE FUND Name change 54-2103707 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/surte E Telephone number Final return/ 510-858-6054 300 FRANK H OGAWA PLAZA, SUITE 430 termin-ated 1,791,307 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amende OAKLAND, CA 94612 H(a) Is this a group return F Name and address of principal officer, MIALISA BONTA Yes X No for subordinates? pending 300 FRANK H OGAWA PLAZA, SUITE 430 OAKLAND, Yes L H(b) Are all subordinates included? 501(c) (Tax-exempt status X 501(c)(3) (insert no.) 4947(a)(1) or 2 If "No," attach a list. (see instructions) J Website: ► WWW.EASTBAYCOLLEGEFUND.ORG H(c) Group exemption number K Form of organization: Corporation Trust X Association Other > Year of formation: 2002 M State of legal domicile: CA Part I Summary Briefly describe the organization's mission or most significant activities: EDUCATIONAL FINANCIAL ASSISTANCE Governance ___ If the organization discontinued its operations or disposed of more than 25% of its net assets Check this box 16 Number of voting members of the governing body (Part VI, line 1a) 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 37 5 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 250 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (Q) Line (E) VED 0. 7a 0. b Net unrelated business taxable income from Form 990 T. line-39 SO **Prior Year Current Year** AUG **0 3** 2020 5,001,382 1,688,145. Contributions and grants (Part VIII, line 1h) 0 Ô. Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and OSCIEN. UT 122,784 103,162. 0. 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,791,307.5,124,166. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,240,699 810,292. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Õ. 0. Benefits paid to or for members (Part IX, column (A), line 4) 1,476,826. 718,816. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $\overline{0}$ Ô. 16a Professional fundraising fees (Part IX, column (A), line 11e) 1,051. **b** Total fundraising expenses (Part IX, column (D), line 25) 888,778. 639,424. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,606,303. 2,168,532. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,517,863. <377,225.> Revenue less expenses. Subtract line 18 from line 12 Assets or Balances Beginning of Current Year **End of Year** 15,305,840. 14,877,196. 20 Total assets (Part X, line 16) 55,153. 106,572 21 Total liabilities (Part X, line 26) 15,199,268. ,822,043, Net assets or fund balances Subtract line 21 from line 20 Part II | Signature Block Inder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and continued because it is continued to the continued of t 7/15/2020 /VU D U_ Siggature of Others Date Sign

MIALISA BONTA, Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature 7/14/2020 P01313212 Paid KEVIN WILSON self-employed Firm's EIN > 94-3108253 NOVOGRADAC & COMPANY Preparer Firm's name 2033 NORTH MAIN STREET, SUITE 400 **Use Only** Firm's address Phone no. (925) 949-4252 WALNUT CREEK, CA 94596 X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2019)

Form	990 (2019) EAST BAY COLLEGE FUND	54-2103707	Page 2
Pav	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		$\overline{\mathbf{x}}$
1	Briefly describe the organization's mission. THE ORGANIZATION HELPS RESILIENT PUBLIC SCHOOL STUDENT		
	UNDER-REPRESENTED IN HIGHER EDUCATION, ACCESS AND SUCC		IF.
	EXPANDING THEIR LIFE OPPORTUNITIES. THE ORGANIZATION A		
	INVOLVE THE WHOLE COMMUNITY IN PROVIDING COLEGE ACCESS		
_	Did the organization undertake any significant program services during the year which were not listed on the		
2	pnor Form 990 or 990 EZ?		x X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	s? L_Yes	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to crevenue, if any, for each program service reported	• •	
4a	1 740 274	venue \$	
	EAST BAY COLLEGE FUND ("EBCF") PROVIDES COLLEGE ACCESS		
	PUBLIC HIGH SCHOOLS IN OAKLAND. THIS INCLUDES COLLEGE	ADVISING, FA	AFSA
	COMPLETION, AND CREATING A COLLEGE-GOING CULTURE. EBC	F ALSO PROVII	DES
	MULTI-YEAR SCHOLARSHIPS FOR LOW-INCOME STUDENTS TO ATT	END COLLEGE,	AND
	WRAP-AROUND SUPPORT SERVICES, INCLUDING ONE ON ONE MEN		
	COUNSELING, PEER-GROUPS SUPPORT ON CAMPUS, FINANCIAL L		
	LIFE-SKILLS RETREATS THROUGHOUT THE COLLEGE JOURNEY.		
			
			
		 .	
4b	(Code) (Expenses \$ including grants of \$) (Re	venue \$	
			
			
		 	
			
		······································	
4c	(Code) (Expenses \$ including grants of \$) (Re	venue \$	<u> </u>
		· · · · · · · · · · · · · · · · · · ·	
		 	
			
			
			
4d	Other program services (Describe on Schedule O)		
	(Expenses \$ Including grants of \$) (Revenue \$	1	
4e	Total program service expenses ▶ 1,748,374.		

54-2103707

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			_
•	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	ļ	X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	3	-	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	1,0		
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	ļ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	- 1111		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			٠,
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			х
~ ~	complete Schedule G, Part III	19	$\vdash \vdash \vdash$	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200	$\vdash\vdash\vdash$	
- •	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

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Form 990 (2019) EAST BAY COLLEGE F
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	ł		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		i	
	Schedule J	23	<u> </u>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			۱
_	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		╙
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			i
	any tax-exempt bonds?	24c	ļ	<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	ļ	Ļ _
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			۱
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			,,
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		Ì	_V
20	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	_	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			1
_	instructions, for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV			v
h	\cdot	28a	-	X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
·	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	000		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c		X
30	Did the organization receive more than \$25,000 in horizast contributions in the rest complete scriedale in Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		<u> </u>
•	contributions? If "Yes," complete Schedule M			x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
U L	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	3 <u>z</u>		
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33_		<u> </u>
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			_ _
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	x	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		1	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

EAST BAY COLLEGE FUND 54-2103707 Page 5 Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements. filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 14. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes." has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5¢ 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? 5.0 Organizations that may receive deductible contributions under section 170(c). 7 X a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X 7c to file Form 8282? 12. 13. 14 7d d If "Yes." indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 4 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the SER. sponsoring organization have excess business holdings at any time during the year? 8 द्यं पुर Sponsoring organizations maintaining donor advised funds. 9a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter. 10 a initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10417 12a b If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

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excess parachute payment(s) during the year?

If "Yes," complete Form 4720, Schedule O

If "Yes." see instructions and file Form 4720, Schedule N.

Form 990 (2019) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 16 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 16 b Enter the number of voting members included on line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7а b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: x 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Ye<u>s</u> No 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? $\overline{\mathbf{x}}$ a The organization's CEO, Executive Director, or top management official 15a X 15b **b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request ___ Own website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

94612

RACHEL WESTMORELAND - 510-836-8900

300 FRANK H OGAWA PLAZA, SUITE 430, OAKLAND,

Form 990 (2019)	EAST BAY	COLLEGE	FUND		54-210370	07 Page		
Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated								
Employees,	, and Independer	nt Contracto	rs					
Check if Sched	lule O contains a resp	onse or note to a	any line in th	ns Part VII				

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above

(A)	(B)		_	((_		(D)	(E)	(F)
Name and title	Average	(40		Posi		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle:	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of
	week	⊢-	J),,,,,u ₃	T	from	from related	other
	(list any hours for	lirect				L		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	9 0 0	itee		l	sated		(W-2/1099-MISC)	(***2/1033***********************************	organization
	organizations	Individual trustee or director	institutional trustee		yee	E E		(and related
	below	qual	utton	1.	읦	oyee oye	=			organizations
	line)	Indiv	Instit	Officer	Key employee	Highest compensated employee	튑			
(1) MICHAEL MCAFEE	10.00									
PRESIDENT		X		X						
(2) JAMES HARRISON	10.00									
SECRETARY		X		X						
(3) SETH HAMALIAN	10.00									
TREASURER		X		X						
(4) MIALISA BONTA	10.00									
VICE PRESIDENT		X		X			L_			
(5) CHUYI FANG	1.00									
DIRECTOR		X							,	
(6) MARK FRIEDMAN	1.00									
DIRECTOR		X								
(7) COLIN LACON	1.00									
DIRECTOR		X								
(8) LEROY MORISHITA	1.00									
DIRECTOR		X		l .	l					
(9) TOMIQUIA MOSS	1.00									
DIRECTOR] X					ł			
(10) MARIA PIRNER	1.00	Γ								
DIRECTOR		X					l			
(11) RIAZ TAPLIN	1.00	İ						1		,
DIRECTOR		X	ĺ				l			
(12) BARB FREMDER	1.00									
DIRECTOR		x		l						
(13) SUSIE PONCELET	1.00									
DIRECTOR		X								
(14) ROBERT STARK	1.00	1	Г							
DIRECTOR		X				l				
(15) SUSAN STUTZMAN	1.00			1		Т	T			1
DIRECTOR		x			1				}	1
(16) ROSAURA M. ALTAMIRANO	1.00			 	T	T	 			<u> </u>
DIRECTOR		x				1				
(17) SANDRA ERNST	40.00	+==	t	一	 		H			
CO-INTERIM EXECUTIVE DIREC		1	l	х		1	1		1	I

-2103707	Page
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Form 990 (2019) EAST BAY	COLLEGE	<u> </u>	<u> TU</u>	ND.					54-2	103707	Page 8
Part VII Section A. Officers, Directors, Trus		ploy	ees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)		
(A)	(B)				C)			(D) ,	(E)		(F)
Name and title	Average		not c		more	than		Reportable	Reportable		timated
	hours per week					ıs bot or/trus			compensatio		ount of
	(list any	-	Γ			Τ	ΓŤ	from the	from related organization		other pensation
	hours for	direct							(W-2/1099-MIS		om the
	related	ee 0.r	ste			ısate	1	(W-2/1099-MISC)	(. 1	anization
	organizations	l trusi	ᆲ		yee	ed mo	ł			and	l related
	below	indivic ual trustee or director	institutional trustee	, E	Key err ployee	Highest compensated employee	Шer			orga	nizations
	line)	Pur	Tist I	Officer	ě.	星島	펼				
(18) ERIC GUICO CO-INTERIM EXECUTIVE DIREC	40.00		ļ	x			ŀ				
CO-INTERIM EXECUTIVE DIREC			⊢	Ĥ		├─		 			
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			L.		<u> </u>	_	L				
			1				ĺ				
		<u> </u>	⊢	ļ	⊢	┢	-	<u> </u>			
	<u> </u>			}							
1b Subtotal			L	1	_		▶	 			
c Total from continuation sheets to Part V	II, Section A						•				
d Total (add lines 1b and 1c)											
2 Total number of individuals (including but r	ot limited to th	ose	liste	ed al	bove	e) wl	no r	received more than \$100	,000 of reportab	le	
compensation from the organization											y 1 w
O Diddhaanna hat an damaa affi	al	1								[3.3]	Yes No
3 Did the organization list any former officer,	•	ee, r	key e	emp	ioye	e, o	ΠΙζ	gnest compensated emp	ployee on	~~~ .	X
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the si		ام دد	mn	0000	-t		1 0+	har companyation from	the organization	3	- A
and related organizations greater than \$15									the Organization	4	X
5 Did any person listed on line 1a receive or a	•								idual for services		21 1 1
rendered to the organization? If "Yes," com					_					5	X
Section B. Independent Contractors											
1 Complete this table for your five highest co	-	-								npensation fr	om
the organization Report compensation for	the calendar y	ear (endı	ng v	vith	or w	<u>ıthır</u>		year.		
(A) Name and business	address	NO	INC	2				(B) Description of s	ervices	(C) Compen	
						_					
											_
							4				
				—			┪				
					_		_				
					<u></u>						
2 Total number of independent contractors (i		ot lii	mıte	d to	tho	se li	stec	d above) who received n	nore than	؞ ؿؿڂڰٵ؞؞ڴۿ	40 t 3
\$100,000 of compensation from the organi	Lation									44 44 5 44 44 5 5 5 5 5 5 5 5 5 5 5 5 5	

Form 990 (2019)

EAST BAY COLLEGE FUND

(Egg)	de 12	171a	Check if Schedule O contains a resp	oonse or note to anv I	ine in this Part VIII			
			-		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Cortr-butions, Gifts, Grants and Cther Similar Amounts		b	I-ederated campaigns 1a Membership ducs 1b Fundraising events 1c Related organizations 1d					
rbutions, C Cther Simil		e f	Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 16	183,569 1,504,576				
or P		-	Noncash contributions included in lines 1a 1f	<u> \$</u>	1,688,145.	Appear Control Mark		
۳		11	Total. Add lines 1a-11	Business Code	William Market Franch Art Day 200 Mark	A STATE OF THE PARTY OF THE PAR	Property Control	
	2	a		Business code	ASSET CHANGER AND PROPERTY.	High and the sale and the sale of the sale	MENERAL MENERAL PROPERTY AND PR	THE PROPERTY OF SEC.
ا يخ	_	b		-,	† 			
Program Service Revenue		С						
le Ve		d						<u> </u>
Po Pr		e						
٠ ا		f	All other program-service revenue	L	<u> </u>	AND SELECT THAT WHEN EXECUTED AND EXECUTED A	District States a week-thing the	STATISTICS THE STATE OF THE STATE OF
		g		<u>_</u>				
	3		Investment income (including dividends	, interest, and	103,162.			103,162
	4		other similar amounts) Income from investment of tax-exempt t	nond proceeds	103,102.			103,102
	5		Royalties	bona proceeds				
			· (i) Re	al (ii) Personal	空	POTENTIAL DE	THE THE THE SECTION OF THE SECTION O	
	6	а	Gross rents 6a					
		b	Less rental expenses 6h					
		С	Rental income or (loss) 6c					
			` '	> _	a the term of the materials and the second of the second o	ANTENNA MARINANA TANDRAS AN KRASS	. North feeders above 5, 20177775-000e	Distriction of the Control of the Co
	7	а	Gross amount from sales of (i) Secu	rities (II) Other	4.7			
			assets other than inventory /a Less: cost or other basis		4			
<u>a</u>		D						
Revenue		c	and sales expenses 7b Gain or (loss) 7c					
Re			Net gain or (loss)	•	S. Park C. Property and and a state of the state of	Lh History Artific subsequence Control	ALL SAME MECONSTRUCTIONS	TOWN A MANAGE ASSESSMENT OF
her	8		Gross income from fundraising events (not	٦				
გ			including \$ of					
			contributions reported on line 1c) See					
1,1			Part IV, line 18	8a	Sign for the sign of the sign			
•			Less. direct expenses	[8b]			一种是是是一种的一种。	Carrier States
			Net income or (loss) from fundraising ev		THE STATE OF		1407401240124135	THE CAME TO SUSPERIOR
	J	а	Gross income from gaming activities. So Part IV, line 19	94				
		h	Less: direct expenses	9b				
			Net income or (loss) from gaming activit		sterm, and dean ability to hand and a bear	Sing Life Carpendates - Co C	S PRINTED TO SERVICE	TESCRIPTION THREET TO THE
			Gross sales of inventory, less returns				可能性性的可能	White the state of
			and allowances	10a				
	,	b	Less: cost of goods sold	10h			Heran Strain	
		С	Net income or (loss) from sales of invent		747 6 3 15 8 3 17 10 10 10 10 10 10 10 10 10 10 10 10 10	901 0 00 0 00 00 00 00 00 00 00 00 00 00	Lactor during have been been repulled	Transport marries of the transport of the transport
sn			-	Business Code		Christian Harrich		destrict and destrict
ne iue	11	_			-		 	
Miscellaneous Revenue		b				,		
Re		d d	All other revenue	— 	 	 	 	
Σ			Total. Add lines 11a-11d	<u> </u>	<u> </u>		建筑是原始表	HIT SHEET
	12	<u> </u>	Total revenue. See instructions		1,791,307.	0.	0.	103,162

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).						
	Check if Schedule O contains a respo	nse or note to any line in (A)	this Part IX (B)	(C)	·	
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to domestic organizations			RESERVE TO SERVE THE PROPERTY OF THE PROPERTY	THE STATES	
	and domestic governments. See Part IV, line 21				Can Park Land	
2	Grants and other assistance to domestic	010 000	010 000			
	individuals See Part IV, line 22	810,292.	810,292.			
3	Grants and other assistance to foreign					
	organizations, foreign governments, and foreign					
	individuals See Part IV, lines 15 and 16					
4	Benefits paid to or for members		· · · · · · · · · · · · · · · · · · ·	MATERIAL STATES	THE RESERVE OF THE PERSON OF T	
5	Compensation of current officers, directors,	125 267	102 202	24 075		
_	trustees, and key employees	135,367.	103,392.	31,975.	·	
6	Compensation not included above to disqualified					
	persons (as defined under section 4958(f)(1)) and		}		1	
_	persons described in section 4958(c)(3)(B)	453 401	246 266	107 115	ļ	
7	Other salaries and wages	453,481.	346,366.	107,115.		
8	Pension plan accruals and contributions (include	į	Į.			
_	section 401(k) and 403(b) employer contributions)	76 427	58,382.	10 055		
9	Other employee benefits	76,437. 53,531.	40,887.	18,055. 12,644.		
10	Payroll taxes	33,331.	40,00/.	12,044.	<u> </u>	
11	Fees for services (nonemployees).)]			
a	Management	<u> </u>	 			
b	Legal	81,975.	36,963.	45,012.		
c	Accounting	01,9/3.	30,303.	45,012.		
đ	Lobbying		C DECEMBER OF STREET, ST. 14	BART SEPTEMBER DE 1741 A SOMECHANT		
e	Professional fundraising services. See Part IV, line 17		CALLERY STATES	证为是否认为不是。		
f	Investment management fees		 	<u> </u>		
g	Other (If line 11g amount exceeds 10% of line 25,					
	column (A) amount, list line 11g expenses on Sch O.)	<u> </u>				
12	Advertising and promotion	60,019.	31,985.	28,034.		
13	Office expenses	00,019.	31,363.	20,034.		
14	Information technology					
15	Royalties	150,256.	84,216.	66,040.		
16	Occupancy	130,256.	11,547.	1,812.		
17	Travel	13,335.	11,347.	1,012.		
18	Payments of travel or entertainment expenses					
40	for any federal, state, or local public officials					
19	Conferences, conventions, and meetings					
20	Interest		 			
21	Payments to affiliates	11,458.	·	11,458.		
22	Depreciation, depletion, and amortization	11,100	-	11, 100		
23	Other expenses, Itemize expenses not covered	Beerle William Will	ROSSEATT TO YEST TO LETT.	THE REPLY AND THE REPLY THE	CHECKETER RESIDENCE CONTROL	
24	above (List miscellaneous expenses on line 24e. If	The Cold Section				
	Ime 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule Q.)		金利尼纳金		3.41	
•	LIFE SKILL TRAINING AND	163,639.	157,296.	6,343.	Hit was been a refused to the maker being	
a b	OTHER PERSONNEL EXPENSE	145,222.	65,481.	79,741.		
C	OTHER OTHER	12,445.	1,567.	10,878.		
d	FUNDRAISING	1,051.	2,307.	10,070.	1,051.	
	All other expenses	2,001.	 		2,001	
2 5	Total functional expenses. Add lines 1 through 24e	2,168,532.	1,748,374.	419,107.	1,051	
<u>20</u> 26	Joint costs. Complete this line only if the organization	=,==0,002.			2,001	
20	reported in column (B) joint costs from a combined					
	educational campaign and fundraising solicitation.					
	Check here if following SOP 98-2 (ASC 958-720)		ļ			
	0.01-20-20	<u> </u>		<u> </u>	Form 990 (2019	

Form 990 (2019)

EAST BAY COLLEGE FUND

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 3,091,045. 2,883,684. 1 1 Cash - non-interest-bearing 8,647,759. 9,437,774. 2 2 Savings and temporary cash investments 3,612,194. 2,197,812. 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 188 定位EN 特别的 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 Assets 8 Inventories for sale or use 56,860. 56,680. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 53,284 10a basis. Complete Part VI of Schedule D 8,274 50,093. 45,010. 10b b Less accumulated depreciation 10c 11 11 Investments - publicly traded securities 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 48,875. 55,250. 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 14,877,196. 15,305,840. 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 18,178. 23,456. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to any current or former officer, director, 22 Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 88,394 31,697. 25 of Schedule D 106,572 55,153. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow FASB ASC 958, check here **Net Assets or Fund Balances** and complete lines 27, 28, 32, and 33. 2,147,575 2,199,885. 27 Net assets without donor restrictions 13,051,693 12,622,158. 28 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 15,199,268. 14,822,043. 32 32 Total net assets or fund balances 14,877,196. 15,305,840. 33 Total liabilities and net assets/fund balances

	1990 (2019) EAST BAY COLLEGE FUND	54-	-21037(7	Page 1	2
Pa	Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI	,				<u>]</u>
						_
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,307	
2	Total expenses (must equal Part IX, column (A), line 25)	2			,532	
3	Revenue less expenses. Subtract line 2 from line 1	3			, 225	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	<u> 15,</u> 1	199	,268	•
5	Net unrealized gains (losses) on investments	5				_
6	Donated services and use of facilities	6				_
7	Investment expenses .	7				_
8	Prior period adjustments .	8				_
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0	•
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B)) .	10	14,8	322	,043	•
₁ Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII				X	<u>]</u>
				Y	es No	_
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		• •	;		1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	7	- 2	مثلب أيب	Ĵ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		_2	2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	a no t		ي . ت	,	1
	separate basis, consolidated basis, or both		٠۵.	: 1		Ì
	Separate basis Consolidated basis Both consolidated and separate basis		<u></u>	<u>.: }_</u>		j
b	Were the organization's financial statements audited by an independent accountant?		_2	2b 2	ζ	_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	i, [*_	1		Į,
	consolidated basis, or both:		ļ',			1
	Separate basis Consolidated basis Both consolidated and separate basis		ــاً ا	_ _		1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit				
	review, or compilation of its financial statements and selection of an independent accountant?		2	2c 2	ζ	_
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci	nedule (O			J
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Au	dit			
	Act and OMB Circular A-133?			Ba	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired au	drt -			_
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3	b		
			Fo	rm 9 9	90 (2019	-

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2019
Open to Public

Employer identification number Name of the organization EAST BAY COLLEGE FUND 54-2103707 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). \mathbf{X} An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university 10 L An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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| Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not	İ		1	,			
	ınclude any "unusual grants ")	3,488,693.	3,917,957.	2,261,790.	3,630,625.	1,185,592.	14,484,657.	
2	Tax revenues levied for the organ-							
	ızation's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	3,488,693.	3,917,957.	2,261,790.	3,630,625.	1,185,592.	14,484,657.	
5	The portion of total contributions	THE STATE OF	FD-EVENT	是四种实际	国的	开始 第二次		
	by each person (other than a							
	governmental unit or publicly			M. C. C. Tar	" "			
	supported organization) included					44-250		
	on line 1 that exceeds 2% of the							
	amount shown on line 11,			到,张老子等				
	column (f)	Service Services	はいる。	まれる。	別の発生に対	的主要的呼	4,159,003.	
	Public support. Subtract line 5 from line 4	APPROXIMENTED	SALL STATES OF SALLS AND S	是是指非体态	对话的 经相对法	2. 中央北京的江	10,325,654.	
Sec	ction B. Total Support			······································		·		
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
7	Amounts from line 4	3,488,693.	3,917,957.	2,261,790.	3,630,625.	1,185,592.	14,484,657.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	3,239.	10,992.	20,706.	122,784.	103,162.	260,883.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI)	PERSONAL SERVICE	# Self-broader order as tracered	NAMES ASSESSED AND THE PARTY OF	MATCH WEST SEPTEMBER	m vee vuonatu-	4 - 4 - 5 - 5 - 4 - 5	
	Total support. Add lines 7 through 10			CONTRACTOR OF THE PARTY OF THE	建物的证据		14,745,540.	
	Gross receipts from related activities,	•	•			12		
13	First five years. If the Form 990 is for	-	s tirst, second, thir	a, tourth, or titth ta	ix year as a sectio	n 501(c)(3)	. —	
Sec	organization, check this box and stop ction C. Computation of Publ	ic Support Pe	rcentage		<u>~</u>			
	Public support percentage for 2019 (I			ookumn (6)		14	70.03 %	
	Public support percentage from 2018			Olumin (1))		15	70.03 %	
	33 1/3% support test - 2019. If the c			n line 13, and line	14 is 33 1/3% or n			
iva		-			14 15 55 1/5/6 01 11	iore, check this bo	× and ►X	
h	b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
-	and stop here. The organization qual	*			III 10 10 00 17070	or more, check in	▶ □	
17a	10% -facts-and-circumstances tes		•		e 13, 16a, or 16b, a	and line 14 is 10%	or more	
	and if the organization meets the "fac							
	meets the "facts-and-circumstances"			•		ine organ	>	
h	10% -facts-and-circumstances tes	•	•	. ,	•	17a and line 15 is 1	10% or	
	more, and if the organization meets the							
	organization meets the "facts-and-circ							
18	Private foundation. If the organization		-	•	•		, ▶ □	
						dule A (Form 990		

line 18 is/not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private/foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2019 EAST BAY COLLEGE FUND

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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1	Check the box next to the method that the	e organization used to	satisfy the Integral Part	Test during the yea(see instructions)
---	---	------------------------	---------------------------	---------------------------------------

- The organization satisfied the Activities Test Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
- The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions).

Activities Test Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement
- Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2b

За

1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	on Nov. 20, 1970 (explain in l	Part VI) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	omplete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6	<u></u>	<u> </u>
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	3774	APPROPRIATE WAY	AND THE PERSON OF LINE OF
	instructions for short tax year or assets held for part of year).			
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d	 	
	Discount claimed for blockage or other	1000	TO STANKE OF THE	SOLUTION AND A STREET
	factors (explain in detail in Part VI):			
2		2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		ĺ
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount	_		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	71	KOMMENT AND SHOOT	
2	Enter 85% of line 1.	2	THE PARTY OF THE PARTY.	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	THE CONTRACTOR	
4	Enter greater of line 2 or line 3.	4	A TO MANAGE AND AND AND AND AND AND AND AND AND AND	
5	Income tax imposed in prior year	5	UD WAS BURNERED	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional			anization (see

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 EAST BAY COLLEGE FUND 54-2103707 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2019 from Section C, line 6 Line 8 amount divided by line 9 amount (i) (iii) (ii) **Underdistributions** Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2019 Amount for 2019 Distributable amount for 2019 from Section C, line 6 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI) See instructions. Excess distributions carryover, if any, to 2019 a From 2014 **b** From 2015 c From 2016 d From 2017 e From 2018 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2019 from Section D, a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions Excess distributions carryover to 2020. Add lines 3j and 4c. Breakdown of line 7 a Excess from 2015 b Excess from 2016 **《新聞報報報》**

Schedule A (Form 990 or 990-EZ) 2019

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c Excess from 2017

d Excess from 2018

e Excess from 2019

Part VI	P III S	upple: art IV, Sine 1; Par	menta ection A rt IV, Se), lines 5	I Infor A, lines 1 ction D, 5, 6, and	mation. , 2, 3b, 3c lines 2 and	Provide , 4b, 4c, 5 d 3, Part	the expla 5a, 6, 9a, IV, Sectio	nation 9b, 9c n E, lir	s requ ;, 11a, nes 1c,	red by Pa 11b, and 2a, 2b, 3	11c, F a, and	ne 10; Par Part IV, Sec 3b, Part \ this part t	ction B, lin /, line 1, P	a or 17thes 1 and art V, Se	o, Part III d 2, Part ection B,	IV, Section Ine 1e; P	n C,
PART	ΙI	, sh	ORT	YEAR	EXPL	ANATI	ON:										
FISCA	<u>.L</u> ?	YEAR	СНА	NGED	FROM	DECE	MBER	31	то	JUNE	30	YEAR	END.				
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public

Name of the organization

FAST BAY COLLEGE FIND

Employer identification number 2103707

Pa	t I' Organizations Maintaining Donor Advise		r Accoi	Ints Complete of the
Fa			1 7000	Complete it trie
	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds	(b) Fur	nds and other accounts
	Total number of and of user	(a) Borior advised rands	(5)	ido and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v		tunas	
	are the organization's property, subject to the organization's			└ Yes └ No
6	Did the organization inform all grantees, donors, and donor a	•	•	
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose co	nferring	<u> </u>
15.	impermissible private benefit?			Yes No
Pa			t IV, line 7	<u>′·</u>
1	Purpose(s) of conservation easements held by the organization	, ————————————————————————————————————		
	Preservation of land for public use (for example, recrea	· [-	/ important land area
	Protection of natural habitat	Preservation of a	certified h	istoric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of	a conserv	
	day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements		_2a	
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified historic str	ucture included in (a)	2c	<u> </u>
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structure	•	l
	listed in the National Register		2d	<u> </u>
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	rganizatıo	n during the tax
	year >			
4	Number of states where property subject to conservation eas	sement is located >		
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conser	vation eas	sements during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservatio	n easeme	nts during the year
	> \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)	(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			☐ Yes ☐ No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense st	atement a	and
	balance sheet, and include, if applicable, the text of the footr	ote to the organization's financial statement	ts that de:	scribes the
	organization's accounting for conservation easements			
Pa	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, or Oth	er Simi	lar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and	l balance	sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in furth	nerance of	f public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items		
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and bal	ance she	et works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	ance of p	ublic service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1		>	\$
	(ii) Assets included in Form 990, Part X	·	•	\$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financial q		
	the following amounts required to be reported under FASB A	_	• •	
а	Revenue included on Form 990, Part VIII, line 1	-	>	\$
	Assets included in Form 990, Part X			\$

		Y COLLEGE FU			Oth-		4-21			age 2
_	t III Organizations Maintaining C								nued)	
3	Using the organization's acquisition, accessi	on, and other records, o	heck any of the	following th	at make s	ignificant u	use of its			
	collection items (check all that apply)	-								
а	Public exhibition	d L	Loan or exc	hange prog	ram					
b	Scholarly research	e L	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain ho	ow they further t	he organizat	tion's exe	mpt purpo:	se in Par	t XIII		
5	During the year, did the organization solicit o	r receive donations of a	rt, historical trea	sures, or oti	her sımılar	assets		_		
	to be sold to raise funds rather than to be ma	aintained as part of the	organization's c	ollection?				∫ Yes		□ No
Par	t IV Escrow and Custodial Arran	gements. Complete i	f the organization	on answered	"Yes" on	Form 990,	Part IV,	line 9, o	r	
	reported an amount on Form 990, Par	t X, line 21								
1a	is the organization an agent, trustee, custodi	an or other intermediary	for contribution	ns or other a	ssets not	ıncluded				_
	on Form 990, Part X?							Yes	L	∐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the follow	ing table							
								Amoun	ıt	
C	Beginning balance					1c				
d	Additions during the year			<i>'</i>		1d				
е	Distributions during the year			r		1e		_		
f	Ending balance					1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line 21,	for escrow or c	ustodial acc	ount liabil	rty?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the expla	nation has been	provided oi	n Part XIII	•				
_	t V. Endowment Funds. Complete r									
			(b) Prior year	(c) Two year		(d) Three ye	ars back	(e) Fou	r vears	back
1a	Beginning of year balance			<u> </u>		·	-	1		
	Contributions				İ					
	Net investment earnings, gains, and losses			<u> </u>						
	Grants or scholarships			-	 †					
	Other expenditures for facilities				+					
·	and programs									
•	Administrative expenses						-			
'	End of year balance			†				 		
g	Provide the estimated percentage of the curr	ent year and halance (le	no 1a, column (all bold as:				L		
2		•		ajj rielu as.						
	Board designated or quasi-endowment ► Permanent endowment ►	%								
	· · · · · · · · · · · · · · · · · · ·	%								
С	· ————————————————————————————————————	%								
•	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ssion of the organizatio	n that are nelo a	and administ	erea for th	ne organiza	ation			Τ
	by:							<u> </u>	Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations							3a(ii)		-
	If "Yes" on line 3a(ii), are the related organiza			,				3b		
4	Describe in Part XIII the intended uses of the		ent funds							
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answered									
	Description of property	(a) Cost or other	, , ,	or other	, , ,	cumulated	[‡]	(d) Boo	k valu	ıe
		basis (investmen	t) basis	(other)	<u> </u>	reciation				
	Land				الم الهات		MEC.			
b	Buildings						$-\!$			
C	Leasehold improvements			0.004	ļ					4.6
d	Equipment		5	3,284.	Ļ	8,27	4.	4	5,0	10.
	Other		l		<u></u>					4.4
Tota	l. Add lines 1a through 1e (Column (d) must e	gual Form 990, Part X, c	olumn (B), line 1	10c.)						10.
						S	chedule	D (Forr	n 990	2019

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

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54-2103707 Page 4 EAST BAY COLLEGE FUND Schedule D (Form 990) 2019 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 1,791,307. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 2a a Net unrealized gains (losses) on investments 2b b Donated services and use of facilities 2c c Recoveries of prior year grants 2d d Other (Describe in Part XIII.) e Add lines 2a through 2d 1,7913 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4b b Other (Describe in Part XIII.) c Add lines 4a and 4b 1,791 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 2,168,532. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a 2b **b** Prior year adjustments 2c c Other losses 2d d Other (Describe in Part XIII.) 2e Add lines 2a through 2d 2,168,532 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **4**a 4b b Other (Describe in Part XIII) c Add lines 4a and 4b 2,168,532. Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART X, LINE 2: THE PREPARATION OF FINANCIAL STATEMENTS IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRES THE ORGANIZATION TO REPORT INFORMATION REGARDING ITS EXPOSURE TO VARIOUS TAX POSITIONS TAKEN BY THE ORGANIZATION. THE ORGANIZATION HAS DETERMINED WHETHER ANY TAX POSITIONS HAVE MET THE RECOGNITION THRESHOLD AND HAVE MEASURED THE ORGANIZATION'S EXPOSURE TO THOSE TAX POSITIONS. MANAGEMENT BELIEVES THAT THE ORGANIZATION HAS ADEQUATELY ADDRESSED ALL RELEVANT TAX POSITIONS AND THAT THERE ARE NO UNRECORDED TAX LIABILITIES. FEDERAL AND STATE TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO EXAMINE AND AUDIT THE PREVIOUS THREE YEARS OF TAX RETURNS FILED. ANY INTEREST OR PENALTIES ASSESSED TO THE ORGANIZATION ARE RECORDED IN OPERATING EXPENSES.

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019	EAST BA	Y COLLE	GE FUND		54-2	103707 Page 5
Schedule D (Form 990) 2019 RareXIII Supplemental Infor	mation (conti	inued)				
INTEREST OR PENALTI	ES FROM	FEDERAL	OR STATE	TAX AUTHOR	ITIES WERE	RECORDED
IN THE ACCOMPANYING	FINANCI	AL STAT	EMENTS.			
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SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990.

Schedule I (Form 990) (2019) % ⊠ Employer identification number 54-2103707 (h) Purpose of grant or assistance Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table FUND EAST BAY COLLEGE General Information on Grants and Assistance (b) EIN cntena used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Part I Part II

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Schedule I (Form 990) (2019) EAST BAY COLLEGE FUND	SE FUND				54-2103707 Page 2
[:[Part] Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be dublicated if additional space is needed.	s. Complete if the	organization answe	red "Yes" on Form 9	990, Part IV, line 22	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS FOR STUDENTS	206	810 292		CASH	
PariliXं। Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	quired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.	
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932102 10-28-19					Schedule I (Form 990) (2019)

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

2019
Open to Public (Inspection)

Department of the Treasury
Internal Revenue Service

Name of the organization

EAST BAY COLLEGE FUND

Employer identification number 54-2103707

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SCHOLARSHIPS, MENTORING, AND SUPPORT NETWORKS TO ASSIST THESE YOUNG
PEOPLE IN REALIZING THEIR FULL POTENTIAL.
FORM 990, PART VI, SECTION B, LINE 11B:
THE GOVERNING BODY REVIEWS THE FORM 990 BEFORE IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 12C:
DIRECTOR'S ACTIVITIES ARE REVIEWED ON AN ANNUAL BASIS AS TO THEIR ADHERENCE
TO THE CORPORATE CONFLICT OF INTEREST POLICY.
FORM 990, PART VI, SECTION B, LINE 15A:
THE BOARD OF DIRECTORS REVIEW AND APPROVE EXECUTIVE COMPENSATION.
FORM 990, PART VI, SECTION C, LINE 19:
GOVERNING DOCUMENTS CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
ARE AVAILABLE TO THE PUBLIC UPON REQUEST.
FORM 990, PART XII, LINE 2C
PROCESS IS UNCHANGED FROM PRIOR YEAR.